

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

Friends of Carl Domino

ADDRESS (number and street)

136 Terrapin Trail

Check if different
than previously
reported. (ACC)

Jupiter

FL

33458-7737

2. FEC IDENTIFICATION NUMBER ▼

C C00547281

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

FL

18

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y
08 / 26 / 2014in the
State of

FL

(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the
State of

5. Covering Period

M M / D D / Y Y Y Y
07 / 01 / 2014

through

M M / D D / Y Y Y Y
08 / 06 / 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Gregory Wilder

Signature of Treasurer

Gregory Wilder

[Electronically Filed]

Date

M M / D D / Y Y Y Y
08 / 14 / 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 35

Write or Type Committee Name

Friends of Carl Domino

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	6		2	0	1	4

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	10240	191348.63
(b) Total Contribution Refunds (from Line 20(d))	0	0
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	10240	191348.63
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	109573.89	426376.18
(b) Total Offsets to Operating Expenditures (from Line 14).....	0	0
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	109573.89	426376.18
8. Cash on Hand at Close of Reporting Period (from Line 27).....	189972.45	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	425000	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 35

Write or Type Committee Name

Friends of Carl Domino

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y
07		01		2014

To:

M M	/	D D	/	Y Y Y Y
08		06		2014

I. RECEIPTS
COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

8550

161975

(ii) Unitemized.....

1690

23847

(iii) TOTAL of contributions from individuals ▶

10240

185822

(b) Political Party Committees.....

0

0

(c) Other Political Committees (such as PACs).....

0

1000

(d) The Candidate.....

0

4526.63

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

10240

191348.63

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0

0

13. LOANS:

(a) Made or Guaranteed by the Candidate.....

0

425000

(b) All Other Loans.....

0

0

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0

425000

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)

0

0

15. OTHER RECEIPTS (Dividends, Interest, etc.)

0

0

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

10240

616348.63

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 35

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	109573.89	426376.18
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0	0
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0	0
(b) Of All Other Loans	0	0
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0	0
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0	0
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs)	0	0
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0	0
21. OTHER DISBURSEMENTS	0	0
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	109573.89	426376.18

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	289306.34
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	10240
25. SUBTOTAL (add Line 23 and Line 24).....	299546.34
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	109573.89
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	189972.45

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 5 OF 35

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Friends of Carl Domino

A. Full Name (Last, First, Middle Initial)
Robert A Berman

Mailing Address 6731 Donald Ross Road

City State Zip Code
Palm Beach Gardens FL 33418-7208

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Berman Realty Real Estate Broker

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
300

Date of Receipt

M M M	D D D	Y Y Y Y Y
08	06	2014

Transaction ID : A-CF859

Amount of Each Receipt this Period

200

B. Full Name (Last, First, Middle Initial)
Jim Bertino

Mailing Address PO Box 155

City State Zip Code
Jupiter FL 33468-0155

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Action Marketing Executive

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
375

Date of Receipt

M M M	D D D	Y Y Y Y Y
07	31	2014

Transaction ID : A-CF830

Amount of Each Receipt this Period

125

C. Full Name (Last, First, Middle Initial)
Murray R Brown

Mailing Address 661 Maplewood Drive
Suite 22-23

City State Zip Code
Jupiter FL 33458-5556

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Browns Interior Design CEO

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
500

Date of Receipt

M M M	D D D	Y Y Y Y Y
08	05	2014

Transaction ID : A-CF862

Amount of Each Receipt this Period

500

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

825.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 35

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Carl Domino

A. Full Name (Last, First, Middle Initial)
Charles F Casey

Mailing Address 224 Locha Drive

City State Zip Code
Jupiter FL 33458-7733

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ME Casey Investments Self

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
2500

Date of Receipt

M M / D D / Y Y Y Y
08 06 2014

Transaction ID : A-CF856

Amount of Each Receipt this Period

500

B. Full Name (Last, First, Middle Initial)
Dorothy Clapp

Mailing Address 2225 Devonshire Way

City State Zip Code
Palm Beach Gardens FL 33418-6874

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
400

Date of Receipt

M M / D D / Y Y Y Y
08 06 2014

Transaction ID : A-CF857

Amount of Each Receipt this Period

100

C. Full Name (Last, First, Middle Initial)
Richard Derbes

Mailing Address 18166 SE Village Circle

City State Zip Code
Tequesta FL 33469-1795

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
1500

Date of Receipt

M M / D D / Y Y Y Y
08 06 2014

Transaction ID : A-CF854

Amount of Each Receipt this Period

500

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1100.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 7 OF 35

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Friends of Carl Domino

Full Name (Last, First, Middle Initial)

Paul A Dittmar

Mailing Address 4479 SE Sweetwood Way

City
 Stuart

State
 FL

Zip Code
 34997-2257

FEC ID number of contributing
 federal political committee.

C

Name of Employer
 3D Classic Marble

Occupation
 President

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500

Date of Receipt

M M / D D / Y Y Y Y
 08 / 05 / 2014

Transaction ID : A-CF863

Amount of Each Receipt this Period

500

Full Name (Last, First, Middle Initial)

Otto B Divosta

Mailing Address 11818 Turtle Beach Road

City
 North Palm Beach

State
 FL

Zip Code
 33408-3351

FEC ID number of contributing
 federal political committee.

C

Name of Employer
 Retired

Occupation
 Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000

Date of Receipt

M M / D D / Y Y Y Y
 08 / 05 / 2014

Transaction ID : A-CF864

Amount of Each Receipt this Period

1000

Full Name (Last, First, Middle Initial)

Jay I Goldfarb

Mailing Address 4360 Silver Glen Drive

City
 Wellington

State
 FL

Zip Code
 33449-8327

FEC ID number of contributing
 federal political committee.

C

Name of Employer
 Budget Printing

Occupation
 Printer

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250

Date of Receipt

M M / D D / Y Y Y Y
 07 / 31 / 2014

Transaction ID : A-CF844

Amount of Each Receipt this Period

250

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1750.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Friends of Carl Domino

Full Name (Last, First, Middle Initial)

Wilson B Greaton

Mailing Address PO Box 39238

City

Fort Lauderdale

State

FL

Zip Code

33339-9238

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
Attorney

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
07		31		2014

Transaction ID : A-CF845

Amount of Each Receipt this Period

1000

Full Name (Last, First, Middle Initial)

Jimmy Magee

Mailing Address 75 Seaweed Road

City

Southampton

State

NY

Zip Code

11968-1526

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

400

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
07		07		2014

Transaction ID : A-CF816

Amount of Each Receipt this Period

100

Full Name (Last, First, Middle Initial)

William Mattison

Mailing Address 3330 Bridgegate Drive

City

Jupiter

State

FL

Zip Code

33477-1334

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		06		2014

Transaction ID : A-CF858

Amount of Each Receipt this Period

1000

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2100.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Friends of Carl Domino

Full Name (Last, First, Middle Initial)

Michael J Peragine

Mailing Address 277 Sedona Way

City

Palm Beach Gardens

State

FL

Zip Code

33418-1718

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
Investor

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2014

Transaction ID : A-CF838

Amount of Each Receipt this Period

500

Full Name (Last, First, Middle Initial)

Scott SchroederMailing Address 11000 Prosperity Farms Road
Suite 202

City

Palm Beach Gardens

State

FL

Zip Code

33410-3462

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
Attorney

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		07		2014

Transaction ID : A-CF826

Amount of Each Receipt this Period

25

Full Name (Last, First, Middle Initial)

Lauren R Simmons

Mailing Address 12921 Marsh Landing

City

West Palm Beach

State

FL

Zip Code

33418-7550

FEC ID number of contributing
federal political committee.

C

Name of Employer
Simmons BuildingOccupation
Designer

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		05		2014

Transaction ID : A-CF868

Amount of Each Receipt this Period

500

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1025.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Friends of Carl DominoFull Name (Last, First, Middle Initial)
A. Virginia M Spencer

Mailing Address 13 Thurston Drive

City	State	Zip Code
Palm Beach Gardens	FL	33418-7095

FEC ID number of contributing
federal political committee.

C

Name of Employer
Illustrated PropertiesOccupation
Broker

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		05		2014

Transaction ID : A-CF869

Amount of Each Receipt this Period

500

Full Name (Last, First, Middle Initial)
B. Emmett TracyMailing Address 277 Royal Poinciana Way
Suite 180

City	State	Zip Code
Palm Beach	FL	33480-4007

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
07		14		2014

Transaction ID : A-CF828

Amount of Each Receipt this Period

250

Full Name (Last, First, Middle Initial)
C. Hal R Valeche

Mailing Address 128 Viera Drive

City	State	Zip Code
Palm Beach Gardens	FL	33418-1741

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
Investment Management

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		05		2014

Transaction ID : A-CF872

Amount of Each Receipt this Period

1000

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1750.00

8550.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 11 OF 35

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Friends of Carl Domino

Full Name (Last, First, Middle Initial)

A. Aristotle Publishing

Mailing Address 205 Pennsylvania Avenue SE

Date of Disbursement

M M	D D	Y Y Y Y
07	18	2014

City	State	Zip Code
Washington	DC	20003-1164

Purpose of Disbursement
Software fee

001

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Amount of Each Disbursement this Period

700

Transaction ID : B-E-794

B. BB&T

Mailing Address 955 Saxon Boulevard

Date of Disbursement

M M	D D	Y Y Y Y
07	01	2014

City	State	Zip Code
Orange City	FL	32763-8314

Purpose of Disbursement
bank service fee

001

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Amount of Each Disbursement this Period

15

Transaction ID : B-E-803

C. BB&T

Mailing Address 955 Saxon Boulevard

Date of Disbursement

M M	D D	Y Y Y Y
07	31	2014

City	State	Zip Code
Orange City	FL	32763-8314

Purpose of Disbursement
Administrative/Salary/Overhead: Wire fee

001

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Amount of Each Disbursement this Period

15

Transaction ID : B-E-808

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

730.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 13 OF 35

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Carl Domino

Full Name (Last, First, Middle Initial)

A. Campaign Solutions

Mailing Address 117 North Asaph Street

City	State	Zip Code
Alexandria	VA	22314

Purpose of Disbursement
Fundraising: On-line fundraising

003

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		08		2014

Amount of Each Disbursement this Period

3342.66

Transaction ID : B-E-784

B. Comcast

Mailing Address 10435 Ironwood Road

City	State	Zip Code
Palm Beach Gardens	FL	33410-4224

Purpose of Disbursement
Cable and internet service

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		03		2014

Amount of Each Disbursement this Period

544.6

Transaction ID : B-E-802

C. Comcast

Mailing Address 10435 Ironwood Road

City	State	Zip Code
Palm Beach Gardens	FL	33410-4224

Purpose of Disbursement
Cable service

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		29		2014

Amount of Each Disbursement this Period

166.83

Transaction ID : B-E-806

SUBTOTAL of Disbursements This Page (optional).....

4054.09

TOTAL This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 14 OF 35

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Friends of Carl Domino

Full Name (Last, First, Middle Initial)

A. Dickinson and McDonald, P.A

Mailing Address 201 S Florida Avenue

City	State	Zip Code
Deland	FL	32720-5405

Purpose of Disbursement
Accounting

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		01		2014

Amount of Each Disbursement this Period

1000

Transaction ID : B-E-780

B. Dickinson and McDonald, P.A

Mailing Address 201 S Florida Avenue

City	State	Zip Code
Deland	FL	32720-5405

Purpose of Disbursement
Accounting

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		04		2014

Amount of Each Disbursement this Period

1000

Transaction ID : B-E-848

c. Dragonfly Graphics

Mailing Address 861 SW Lakehurst Drive

City	State	Zip Code
Port St Lucie	FL	34983-2462

Purpose of Disbursement
Printing of campaign materials

006

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		07		2014

Amount of Each Disbursement this Period

632.23

Transaction ID : B-E-801

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2632.23

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 15 OF 35

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Friends of Carl Domino

Full Name (Last, First, Middle Initial)

A. eDonation.com

Mailing Address 117 N Saint Asaph Street

City	State	Zip Code
Alexandria	VA	22314-3109

Purpose of Disbursement
Fundraising: On-line fundraising fee

003

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		31		2014

Amount of Each Disbursement this Period

50.92

Transaction ID : B-E-835

B. eDonation.com

Mailing Address 117 N Saint Asaph Street

City	State	Zip Code
Alexandria	VA	22314-3109

Purpose of Disbursement
Fundraising: Web hosting fee

003

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		31		2014

Amount of Each Disbursement this Period

25

Transaction ID : B-E-836

C. eDonation.com

Mailing Address 117 N Saint Asaph Street

City	State	Zip Code
Alexandria	VA	22314-3109

Purpose of Disbursement
Fundraising: Credit card processing fee

003

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		31		2014

Amount of Each Disbursement this Period

49.4

Transaction ID : B-E-837

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

125.32

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Friends of Carl Domino

Full Name (Last, First, Middle Initial)

A. Facebook.Com

Mailing Address 1601 Willow Road

City	State	Zip Code
Menlo Park	CA	94025-1452

Purpose of Disbursement
Advertising: Social media advertising

004

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		18		2014

Amount of Each Disbursement this Period

250.63

Transaction ID : B-E-793

B. Facebook.Com

Mailing Address 1601 Willow Road

City	State	Zip Code
Menlo Park	CA	94025-1452

Purpose of Disbursement
Advertising: Social media advertising

004

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		01		2014

Amount of Each Disbursement this Period

99.2

Transaction ID : B-E-811

C. Fastmail PTY Ltd.Mailing Address Level 1/91 William Street
Melbourne Victoria 3000

City	State	Zip Code
Melbourne		

Purpose of Disbursement
Fundraising: email service

003

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		09		2014

Amount of Each Disbursement this Period

7.66

Transaction ID : B-E-799

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

357.49

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 18 OF 35

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Carl Domino

Full Name (Last, First, Middle Initial)

A. Harland Clarke

Mailing Address 10931 Laureate Drive

Date of Disbursement

M M	D D	Y Y Y Y
07	16	2014

City	State	Zip Code
San Antonio	TX	78249-3312

Amount of Each Disbursement this Period

146.01

Purpose of Disbursement
Check reorder fee

001

Transaction ID : B-E-795

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

B. Maplewood Investors, LLC

Mailing Address 501 Maplewood Drive

Date of Disbursement

M M	D D	Y Y Y Y
08	04	2014

City	State	Zip Code
Jupiter	FL	33458-5577

Amount of Each Disbursement this Period

1400

Purpose of Disbursement
Administrative/Salary/Overhead: Rent

001

Transaction ID : B-E-851

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

C. NationbuilderMailing Address 448 S Hill Street
Suite 200

Date of Disbursement

M M	D D	Y Y Y Y
07	29	2014

City	State	Zip Code
Los Angeles	CA	90013-1155

Amount of Each Disbursement this Period

399

Purpose of Disbursement
Voter Database management

007

Transaction ID : B-E-805

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1945.01

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 19 OF 35

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Carl Domino

Full Name (Last, First, Middle Initial)

A. Public Concepts LLC

Mailing Address 5730 Corporate Way

City	State	Zip Code
West Palm Beach	FL	33407-2046

Purpose of Disbursement
Campaign Event: Printing of invitations

007

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		01		2014

Amount of Each Disbursement this Period

10064.83

Transaction ID : B-E-781

B. Public Concepts LLC

Mailing Address 5730 Corporate Way

City	State	Zip Code
West Palm Beach	FL	33407-2046

Purpose of Disbursement
Material printing and postage

007

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		04		2014

Amount of Each Disbursement this Period

22675.11

Transaction ID : B-E-853

c. St. Lucie Chamber Of Commerce

Mailing Address 2937 W Midway Road

City	State	Zip Code
Fort Pierce	FL	34981-4956

Purpose of Disbursement
Campaign Event: Golf Sponsorship

007

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		21		2014

Amount of Each Disbursement this Period

205

Transaction ID : B-E-789

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

32944.94

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 20 OF 35

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Friends of Carl Domino

Full Name (Last, First, Middle Initial)

A. Strategic Media Placement

Mailing Address 7669 Stagers Loop

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		31		2014

City	State	Zip Code
Delaware	OH	43015-7010

Amount of Each Disbursement this Period

43116.5

Purpose of Disbursement
Advertising: Cable and radio advertising

004

Transaction ID : B-E-807

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
	<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Full Name (Last, First, Middle Initial)

B. USPS

Mailing Address 9995 SE Federal Highway

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		01		2014

City	State	Zip Code
Hobe Sound	FL	33455-4829

Amount of Each Disbursement this Period

491.85

Purpose of Disbursement
Administrative/Salary/Overhead: Stamps

001

Transaction ID : B-E-812

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
	<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Full Name (Last, First, Middle Initial)

C. USPS

Mailing Address 9995 SE Federal Highway

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		04		2014

City	State	Zip Code
Hobe Sound	FL	33455-4829

Amount of Each Disbursement this Period

1225

Purpose of Disbursement
Administrative/Salary/Overhead: Stamps

001

Transaction ID : B-E-813

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
	<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

44833.35

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 21 OF 35

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Friends of Carl Domino

Full Name (Last, First, Middle Initial)

A. Lawrence W Casey

Mailing Address 11070 Oak Way Circle

City	State	Zip Code
Palm Beach Gardens	FL	33410-3314

Purpose of Disbursement
Campaign Event: Fees for event

007

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
	Senate	
	President	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		22		2014

Amount of Each Disbursement this Period

217

Transaction ID : B-E-792

Original vendors exceeding reporting threshold itemized as memo transactions.

B. Republican Party Of Palm Beach CountyMailing Address 1555 Palm Beach Lakes Boulevard
Suite 210

City	State	Zip Code
West Palm Beach	FL	33401-2339

Purpose of Disbursement
Tickets for event

007

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
	Senate	
	President	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		22		2014

Amount of Each Disbursement this Period

100

Transaction ID : B-S-22

[MEMO ITEM]

Subitemization of Lawrence Casey(07/22/14)

c. Annie M Delgado

Mailing Address 1255 NW 105th Terrace

City	State	Zip Code
Ocala	FL	34482-9527

Purpose of Disbursement
Fundraising: Fundraising coordinator

003

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
	Senate	
	President	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		03		2014

Amount of Each Disbursement this Period

2500

Transaction ID : B-E-782

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

2717.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Friends of Carl Domino

Full Name (Last, First, Middle Initial)

A. Annie M Delgado

Mailing Address 1255 NW 105th Terrace

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		11		2014

City	State	Zip Code
Ocala	FL	34482-9527

Amount of Each Disbursement this Period

275

Purpose of Disbursement
Permit Fee

001

Transaction ID : B-E-787

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

Original vendors exceeding reporting threshold itemized as memo transactions.

State: District:

Full Name (Last, First, Middle Initial)

B. City Of Port St. Lucie

Mailing Address 121 SW Port St Lucie Boulevard

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		11		2014

City	State	Zip Code
Port Saint Lucie	FL	34984-5042

Amount of Each Disbursement this Period

275

Purpose of Disbursement
Permit Fee

001

Transaction ID : B-S-19

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)
[MEMO ITEM]

Subitemization of Annie Delgado(07/11/14)

State: District:

Full Name (Last, First, Middle Initial)

c. Annie M Delgado

Mailing Address 1255 NW 105th Terrace

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		04		2014

City	State	Zip Code
Ocala	FL	34482-9527

Amount of Each Disbursement this Period

2500

Purpose of Disbursement
Fundraising: fundraising coordinator

003

Transaction ID : B-E-850

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2775.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 23 OF 35

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Friends of Carl Domino

Full Name (Last, First, Middle Initial)

A. Russell Gibson

Mailing Address PO Box 237

City	State	Zip Code
Stuart	FL	34995-0237

Purpose of Disbursement
Campaign Event: Field Organizing

Candidate Name

Office Sought:	House	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
	Senate	
	President	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		24		2014

Amount of Each Disbursement this Period

908.82

Transaction ID : B-E-810

B. Annette James

Mailing Address 6009 NW Winfield Drive

City	State	Zip Code
Port St Lucie	FL	34986-3738

Purpose of Disbursement
Campaign Event: Field Coordinator

Candidate Name

Office Sought:	House	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
	Senate	
	President	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		21		2014

Amount of Each Disbursement this Period

5718

Transaction ID : B-E-788

c. Gregory B Wilder

Mailing Address 2140 Three M Trail

City	State	Zip Code
Deland	FL	32720-1615

Purpose of Disbursement
Express Delivery

Candidate Name

Office Sought:	House	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
	Senate	
	President	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		10		2014

Amount of Each Disbursement this Period

42.31

Transaction ID : B-E-786

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

6669.13

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Carl Domino

Full Name (Last, First, Middle Initial)

A. Gregory B Wilder

Mailing Address 2140 Three M Trail

Date of Disbursement

M M	D D	Y Y Y Y
07	22	2014

City	State	Zip Code
Deland	FL	32720-1615

Purpose of Disbursement
Express Delivery

001

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Amount of Each Disbursement this Period

11.93

Transaction ID : B-E-791

Original vendors exceeding reporting threshold itemized as memo transactions.

B. The UPS Store

Mailing Address 1702 N Woodland Boulevard

Date of Disbursement

M M	D D	Y Y Y Y
07	22	2014

City	State	Zip Code
Deland	FL	32720-1837

Purpose of Disbursement
Express Delivery

001

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Amount of Each Disbursement this Period

11.93

Transaction ID : B-S-20

[MEMO ITEM]

Subitemization of Gregory Wilder(07/22/14)

c. Gregory B Wilder

Mailing Address 2140 Three M Trail

Date of Disbursement

M M	D D	Y Y Y Y
07	23	2014

City	State	Zip Code
Deland	FL	32720-1615

Purpose of Disbursement
Express Delivery

001

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Amount of Each Disbursement this Period

11.93

Transaction ID : B-E-804

Original vendors exceeding reporting threshold itemized as memo transactions.

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

23.86

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 25 OF 35

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Friends of Carl Domino

Full Name (Last, First, Middle Initial)

A. The UPS Store

Mailing Address 1702 N Woodland Boulevard

Date of Disbursement

M M	D D	Y Y Y Y
07	23	2014

City	State	Zip Code
Deland	FL	32720-1837

Amount of Each Disbursement this Period

11.93

Purpose of Disbursement
Express Delivery

001

Transaction ID : B-S-21

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

[MEMO ITEM]

Subitemization of Gregory Wilder(07/23/14)

State: District:

Full Name (Last, First, Middle Initial)

B. Monica Wilson

Mailing Address 19227 Caribbean Court

Date of Disbursement

M M	D D	Y Y Y Y
07	01	2014

City	State	Zip Code
Jupiter	FL	33469-2073

Amount of Each Disbursement this Period

1230.16

Purpose of Disbursement
Database Management

001

Transaction ID : B-E-779

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

C. Monica Wilson

Mailing Address 19227 Caribbean Court

Date of Disbursement

M M	D D	Y Y Y Y
07	07	2014

City	State	Zip Code
Jupiter	FL	33469-2073

Amount of Each Disbursement this Period

1948.99

Purpose of Disbursement
Database management

001

Transaction ID : B-E-783

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3179.15

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Friends of Carl Domino

Full Name (Last, First, Middle Initial)

A. Monica Wilson

Mailing Address 19227 Caribbean Court

City	State	Zip Code
Jupiter	FL	33469-2073

Purpose of Disbursement
Database management

001

Category/
Type

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		04		2014

Amount of Each Disbursement this Period

2120.16

Transaction ID : B-E-849

B.

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Disbursement this Period

--

C.

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Disbursement this Period

--

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2120.16

109202.76

SCHEDULE C (FEC Form 3)
LOANS

PAGE 27 OF 35

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Friends of Carl Domino

Transaction ID : SC/10-L1

LOAN SOURCE Full Name (Last, First, Middle Initial)

Carl J Domino

[PERSONAL FUNDS]

Election: 2014

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
136 Terrapin Trail

City

State

ZIP Code

Jupiter

FL

33458-7737

Original Amount of Loan

25000

Cumulative Payment To Date

0

Balance Outstanding at Close of This Period

25000

TERMS

Date Incurred

M M / D D / Y Y Y Y
07 / 22 / 2013

Date Due

M M / D D / Y Y Y Y
None

Interest Rate

0.00 % (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

25000.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 28 OF 35

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Friends of Carl Domino

Transaction ID : SC/10-L2

LOAN SOURCE Full Name (Last, First, Middle Initial)

Carl J Domino

[PERSONAL FUNDS]

Election: 2014

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
136 Terrapin Trail

City

State

ZIP Code

Jupiter

FL

33458-7737

Original Amount of Loan

50000

Cumulative Payment To Date

0

Balance Outstanding at Close of This Period

50000

TERMS

Date Incurred

M M / D D / Y Y Y Y
08 / 20 / 2013

Date Due

M M / D D / Y Y Y Y

D D / Y Y Y Y

None

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

50000.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 29 OF 35

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Friends of Carl Domino

Transaction ID : SC/10-L3

LOAN SOURCE Full Name (Last, First, Middle Initial)

Carl J Domino

[PERSONAL FUNDS]

Election: 2014

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
136 Terrapin Trail

City

State

ZIP Code

Jupiter

FL

33458-7737

Original Amount of Loan

50000

Cumulative Payment To Date

0

Balance Outstanding at Close of This Period

50000

TERMS

Date Incurred

M M / D D / Y Y Y Y
09 / 17 / 2013

Date Due

M M / D D / Y Y Y Y

None

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

50000.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 30 OF 35

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Friends of Carl Domino

Transaction ID : SC/10-L4

LOAN SOURCE Full Name (Last, First, Middle Initial)

Carl J Domino

[PERSONAL FUNDS]

Election: 2014

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
136 Terrapin Trail

City

State

ZIP Code

Jupiter

FL

33458-7737

Original Amount of Loan

50000

Cumulative Payment To Date

0

Balance Outstanding at Close of This Period

50000

TERMS

Date Incurred

M M / D D / Y Y Y Y
10 18 / 2013

Date Due

M M / D D / Y Y Y Y
None

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

50000.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 31 OF 35

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Friends of Carl Domino

Transaction ID : SC/10-L5

LOAN SOURCE Full Name (Last, First, Middle Initial)

Carl J Domino

[PERSONAL FUNDS]

Election: 2014

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
136 Terrapin Trail

City

State

ZIP Code

Jupiter

FL

33458-7737

Original Amount of Loan

50000

Cumulative Payment To Date

0

Balance Outstanding at Close of This Period

50000

TERMS

Date Incurred

M M / D D / Y Y Y Y
11 / 20 / 2013

Date Due

M M / D D / Y Y Y Y
None

Interest Rate

0.00 % (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

50000.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 32 OF 35

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Friends of Carl Domino

Transaction ID : SC/10-L6

LOAN SOURCE Full Name (Last, First, Middle Initial)

Carl J Domino

[PERSONAL FUNDS]

Election: 2014

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
136 Terrapin Trail

City

State

ZIP Code

Jupiter

FL

33458-7737

Original Amount of Loan

50000

Cumulative Payment To Date

0

Balance Outstanding at Close of This Period

50000

TERMS

Date Incurred

M M / D D / Y Y Y Y
12 31 / 2013

Date Due

M M / D D / Y Y Y Y
None

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

50000.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 33 OF 35

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Friends of Carl Domino

Transaction ID : SC/10-L7

LOAN SOURCE Full Name (Last, First, Middle Initial)

Carl J Domino

[PERSONAL FUNDS]

Election: 2014

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
136 Terrapin Trail

City

State

ZIP Code

Jupiter

FL

33458-7737

Original Amount of Loan

50000

Cumulative Payment To Date

0

Balance Outstanding at Close of This Period

50000

TERMS

Date Incurred

M M / D D / Y Y
03 / 07 / 2014

Date Due

M M / D D / Y Y

None

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

50000.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 34 OF 35

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Friends of Carl Domino

Transaction ID : SC/10-L8

LOAN SOURCE Full Name (Last, First, Middle Initial)

Carl J Domino

[PERSONAL FUNDS]

Election: 2014

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
136 Terrapin Trail

City

State

ZIP Code

Jupiter

FL

33458-7737

Original Amount of Loan

50000

Cumulative Payment To Date

0

Balance Outstanding at Close of This Period

50000

TERMS

Date Incurred

M M / D D / Y Y
03 / 18 / 2014

Date Due

M M / D D / Y Y

None

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

50000.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 35 OF 35

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Friends of Carl Domino

Transaction ID : SC/10-L9

LOAN SOURCE Full Name (Last, First, Middle Initial)

Carl J Domino

[PERSONAL FUNDS]

Election: 2014

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
136 Terrapin Trail

City

State

ZIP Code

Jupiter

FL

33458-7737

Original Amount of Loan

50000

Cumulative Payment To Date

0

Balance Outstanding at Close of This Period

50000

TERMS

Date Incurred

M M / D D / Y Y Y Y
03 / 28 / 2014

Date Due

M M / D D / Y Y Y Y

None

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

50000.00

TOTALS This Period (last page in this line only)..... ►

425000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.